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RE: U.S. Serial No.: 10/607,190

The Commissioner is authorized to deduct/credit Deposit Account No. 50-2283 (59489-8022.US02) to complete this procedure. Thank you.

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On March 16, 2004, By: Sharon Yalborough

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CERTIFICATE OF TRANSMISSION BY I hereby certify that this paper (along with any referred to facsimile to Examiner Jason M. Greene of the United States Pate 703-872-9306 on this Date: March (2, 2004) By:	ent and Traderpark Office at Art Unit 1724 at Fax No.
	PATENT
UNITED STATES PATENT AND	TRADEMARK OFFICE
IN RE APPLICATION OF: ARQUIN ET AL. SERIAL NO.: 10/607,109 FILED: JUNE 26, 2003 FOR: GAS PURIFICATION SYSTEM WITH AN INTEGRATED HYDROGEN SORPTION AND FILTER ASSEMBLY	EXAMINER: JASON M. GREENE ART UNIT: 1724 CONFIRMATION NO.: 5423

Mail Stop: Box No-Fee Amendment

P.O. Box 1450

Alexandria, VA 22313-1450

TRANSMITTAL

\bowtie	Trans	nsmitted herewith are the following documents for the above-referenced application.						
	\boxtimes	Response to the No	tice of Non-Compliant Amend	lment				
			STATUS					
\boxtimes	Appli	cant is:						
	\boxtimes	other than a small	entity.					
			EXTENSION OF TIME					
	Appli of mo	icant petitions for an conths checked below:	extension of time under 37 CFI	R 1.136 for the total number				
		Extension (months)	Fee for other than small entity	Fee for small entity				
		one month	\$ 110.00 \$ 410.00	\$ 55.00 \$205.00				
		petition is hereby	that no extension of time is remade to provide for the possibled for a petition for extension o	quired. However, this conditional lity that applicant has inadvertently of time.				
\boxtimes	If an	additional extension	of time is required please consi	ider this a petition therefor.				
		An extension for deducted from the Extension fee due	total fee due for the total mon	ared and the fee paid therefor of \$0.00 is the of extension now requested: No				

PAGE 2/9 * RCVD AT 3/16/2004 3:11:40 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-1/5 * DNIS:8729306 * CSID:202 434 1690 * DURATION (mm-ss):01-56

FEE FOR CLAIMS

The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2) (Col. 3)		3)	SMALL ENTITY Filing Fee: \$375.00		OR	OTHER THAN A SMALL ENTITY Filing Fee: \$750.00	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Prese Ext		Rate	Addit. Fec		Rate	Addit. Fee
Total	11	Minus		= .		x9=	\$		x18=	\$0
ndep.	2	Minus	3	=		x42=	\$		x84≃	\$0
FIRST	PRESENTATIO	N OF MULT	TPLE DEP. CL	AIM		+140=	\$		x280=	\$0
						TOTAL ADDIT. FEE	\$	OR	TOTAL ADDIT. FEE	\$0

\boxtimes	No additional fee for claims required. Total additional fee for claims required \$0.00
	FEE PAYMENT
	Attached is check No the sum of \$ as payment for () month extension.
	Charge Account No. 50-2283 the sum of.
	FEE DEFICIENCY
\boxtimes	The Commissioner is authorized to charge any required fees, additional fees, or credit any overpayment to Deposit Account 50-2283 (59489-8022 US02).
	Respectfully submitted,
Date:]	March 16, 2004

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